M I N U T E S

Health Information Technology and Transparency
Advisory Board and Ad Hoc Expert Meeting

Transparency Standing Committee
Conference Room 5.480
January 17, 2007
11:00 a.m. – 3:30 p.m.

Member Attendance:

Marsha Burke	Dr. Jack Chapman	Monye Connolly
Chris Downing	Honorable Judson Hill	George Israel
Doug Moses	Dr. Louvenia A. Rainge	

Chris Downing, Chairman of the Transparency Standing Committee, began the session by providing background information on transparency at the federal level. At this time the federal level wants to reach out to healthcare employers about the four corner stones: Increase Transparency in Pricing, Increase Transparency in Quality, Encourage Adoption of Health Information Technology (HIT) and Provide Options that promote Quality and Efficiency. Because healthcare costs are increasing, the committee would like to provide consumers with the quality and cost of procedures and prescriptions. This will result in health information becoming more transparent for consumer decisions. The following three presentations were presented to the committee, (1) Information Technology Transformation and (2) State Legislation Relating to Disclosure of Hospital and Health Charges presented by General Counsel, Charemon Grant, Executive Director of Health Planning, Robert Rozier, and Statistical Unit Manager, Matt Jarrard from the Georgia Department of Community Health (DCH) and (3) Prescription Drug Cost Transparency presented by Jerry Dubberly from DCH, which are viewable on the DCH Web site at www.dch.ga.gov under the HITT Advisory Board forum. The meeting began with an introduction from Charemon Grant on what information the Department has access to that would lend to transparency. The Committee Chairman then opened the discussion on transparency to the attendees.

George Israel began the discussion by highlighting two issues regarding transparency: quality care and cost. He recommends that the committee speak with various physician groups to find out their feelings on quality standards. There is a vast amount of updated technology that is being shown across various media channels that physicians are interested in testing / using. Mr. Israel suggests that we reach out to physicians to determine if the new technology is improving the quality and cost of healthcare. He would like to have

the committee bring in experts on how to conduct business using health information technology.

Wayne Oliver mentioned three sites that the transparency committee should examine. Two are from Florida and one from Missouri. The following Web sites reflect pharmacy reimbursement levels for Medicaid and prescription cost from the least to the most expensive. The information on the Web sites is user friendly and empowers a consumer to find and access the information quickly containing pharmacy information. The sites to review are:

1. www.floridacomparedcare.com
2. www.myfloridarx.com
3. www.morxcompare.mo.gov

Marsha Burke emphasized to the committee that as the committee develop their strategies for transparency to keep in mind that consumers want to know what their out of pocket costs are.

Robert Rozier commented that the Commissioner would like to see the group not only concentrate on hospitals but to include home health agencies, nursing homes, personal care homes, etc. into the Georgia transparency.

The Committee Chairman asked Joyce Reid, RN, MS, from the Georgia Hospital Association (GHA) to provide some background information on GHA's efforts to build a consumer information site. Currently GHA's site will allow you to compare the core measures of up to six hospitals within three counties of Georgia. The site provides consumers with insurance information and definitions of different insurance plans that are offered by insurance companies. The top insurance companies in the state are listed first. A range of insurance prices are provided to the consumer to see which insurance company offers the better plan / rates. There is also a quality index on the site. It is important to be careful when comparing hospitals, because numbers are not the only comparison factor. Consumers need to see the cost and the quality of care. Presently, the GHA site only offers in-patient costs and is working to incorporate out-patient costs as well. The information on the site is put into laymen terms so that the consumer can understand healthcare terminology. Due to requests from consumers at focus groups, GHA is considering showing how hospitals have an impact on their communities and economic development. There are three ways to view the GHA site:

1. www.insights.org
2. www.gahospitalquality.org
3. www.gha.org

Matt Jarrard of DCH indicated in his presentation that 33 states have existing statutory or regulatory provisions. The most impressive thus far is the state of Florida. He also discussed slides from the Florida transparency site.

Senator Judson Hill brainstormed about a potential consumer information Web site that would enable consumers to go to one place for health information. Pop-ups would be available to provide the kind of information needed. For example, the consumer could select from various options on a menu. One of the options that might be available would be diabetes. The next screen would provide the consumer with hospitals in the area specializing in diabetes care, physicians with diabetic practices, educational tools, cost and quality of care information. Senator Hill has spoken with Lisa Rawlins in Florida and feels that she can help the committee with the dos and don'ts and what worked for Florida's transparency consumer site.

Mr. Rozier further emphasized to the committee that they will need to decide what information they would like to present and make available to consumers. Florida had broken into five workgroups within their transparency committee to establish the following areas:
1. Health Care Facility and Ambulatory Surgery Data Workgroup
2. Hospital Acquired Infections Technical Workgroup
3. Health Plan Consumer Report Technical Workgroup
4. Physician Data Technical Workgroup
5. Public Relations / Communications Technical Workgroup

Although the committee is not large enough to split into these workgroups, the Committee Chairman agreed that the next transparency meetings would be dedicated to each of the areas as a starting point for the committee.

Committee Chairperson Downing closed the session by stating the next steps for the group. Prior to the next meeting, he would like to see each of the committee members explore the Web sites provided. The committee should be able to provide suggestions about people they would like to present information and recommendations in addition the group might consider having someone from the federal government come to present information on transparency as well. In addition, the committee should develop a listing of what sources are already available in Georgia.

THESE MINUTES ARE HEREBY APPROVED AND ADOPTED THE
_____ DAY OF _____, 2007.

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Chris Downing, Standing Committee Chairperson